



No Fee Required



State Water Resources Control Board

DUPLICATE CERTIFICATES FOR WASTEWATER TREATMENT PLANT OPERATORS WHO WORK AT MULTIPLE PLANTS

According to the California Code of Regulations, title 23, division 3, chapter 26, section 3703:

Operators, and operators-in-training shall display their valid certificates in an area accessible to the public at each wastewater treatment plant where employed. If no area is accessible to the public, the certificates shall be posted in an accessible area at the wastewater treatment plant owner's headquarters.

Print your name as it appears on your wastewater treatment plant operator certificate.

Name: Last: _____ First: _____ Middle: _____ D.O.B: _____

Mailing Address: _____ Apt. #: _____

City: _____ County: _____ State: _____ Zip: _____

Check box if your address has changed.

Telephone: Cell: (____) _____ Telephone: Home: (____) _____

E-Mail Address: _____ Certificate Grade: _____ Certificate Number: _____

Check box if want to receive public notices from the Wastewater Operator Certification Program.

Check all that apply: Are you currently or have you even been a California certified Drinking Water Operator:

Treatment: Gradelevel: _____ Certificate#: _____ Exp: _____ Distribution: GradeLevel: _____ Certificate#: _____ Exp: _____

(List each Wastewater Treatment Plant that you are currently working at. Attach additional sheets if necessary.)

(1) Name of Wastewater Treatment (WWTP) Employer: _____

WWTP Mailing Address: _____

City: _____ State: _____ Zip: _____

WWTP/Employer Telephone: () _____ ext. _____

(2) Name of WWTP/Employer: _____

WWTP/Employer Mailing Address: _____

City: _____ State: _____ Zip: _____

WWTP/Employer Telephone: () _____ ext. _____

(3) Name of WWTP/Employer: _____

WWTP/Employer: _____

City: _____ State: _____ Zip: _____

WWTP/Employer Telephone: () _____ ext. _____

Mailing Address: State Water Resources Control Board Wastewater Operator Certification P.O. Box 944212 Sacramento, CA 94244-2120
Overnight Mailing Address: State Water Resources Control Board Wastewater Operator Certification 1001 I Street, 17 th Floor Sacramento, CA 95814

Direct any questions concerning this application to (916) 341-5639 or wwopcertprogram@waterboards.ca.gov.

Print Name: _____ Original Signature:* _____ Date: _____

*PLEASE SIGN IN BLUE INK.